## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DO	CKET NO.	10005508-1
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As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name:

in a contonior book offi	ou addin	See Chief City	"Ottottib ate a	5 014104 001011 1,0	VI IO	my name,		
I believe I am the orig and joint inventor (if pl a patent is sought on t	ural nar	nes are liste	d below) of	only one name is the subject matte	listed r whic	below) or an c ch is claimed an	ıriginal, fir ıd for whi	rst ch
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	as US Application No. or PCT International Application and was amended on (if applicable).							
Number						• •		
I hereby state that I h including the claims, a disclose all information	is amen	ded by any	amendment	(s) referred to ab-	ove.	i acknowledge		
Foreign Application(s) and/o	r Claim of	Foreign Priorit	ry					
l hereby claim foreign priori inventor(s) certificate listed a filing date before that of ti	ns weled	d have also ide	intified below ar	ny foreign application i				
COUNTRY		APPLICATIO	N NUMBER	DATE FILED	PF	RIDRITY CLAIMED UNDE	R 35 U.S.C. 11€	9
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Provisional Application								
I hereby claim the benefit u below:	nder Title	35, United \$t	ates Code Sect	on 119(e) of any Unit	ted Ster	tes provisional appl	ication(s) lis	rted
		APPLICATION NO	IMBER	FILING DATE				
U, S. Pri <mark>ority Claim</mark> I hereby claim the benefit u	· · · · · · · · · · · · · · · · · · ·							
insofar as the subject matte manner provided by the firs information as defined in Tit application and the national	t paragras le 37, Co	oh of Title 35, de of Federal F	United States ( Regulations, Sec	Code Section 112, I a tion 1.56(a) which oc	cknowl	edge the duty to di	isclose mate	arial
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POWER OF ATTORNEY:		<u> </u>						
As a named inventor, I hel business in the Patent and T				and/or agent(s) to pr	osacute	this application a	nd transact	ali
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Intellectual Property Administration P.O. Box 272400		T. Grant Rit						
Fort Collins, Colorado 8	0527-240	00		(970) 898-0	1697			
I hereby declare that a made on information a with the knowledge imprisonment, or both false statements may	and bel that wi , under jeopardi	lief are belie liful false s Section 10 ze the valid	eved to be tr statements a Q1 of Title 1	ue; and further the country of the like so read the United Solication or any page 2016.	nat the made States Itent is	ese statements are punishable Code and that ssued thereon.	were ma	ade or
Full Name of Inventor: Na	ney C. C	heung		Citizenship: [	U.S.A.			
-	19906 Scotland Drive, Saratoga, CA 95070					<del></del> ,		
Post Office Address: 19		Cotland Driv	e, Saratoga,		1 4 -	- 0 /		
Inventor's Signature	<u> </u>	Care		10-0	40	<u> </u>		

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(Use Page Two For Additional Inventor(s) Signature(e))

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

## ATTORNEY DOCKET NO. 10005508-1

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Inventor's Signature		Date	
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Residence:			
Post Office Address:			
		Date	
Inventor's Signature		Date	
			Circumbia
Full Name of # 4 joint inventor			Citizenship:
Residence:			
Post Office Address:			
Inventor a Signature		Date	
Full Name of # 5 joint invento	or:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint invent	or:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 7 joint Invent	or		Citizenship:
Residence:			
Post Office Address:			
1031 011108 Addiess.			
Inventor's Signature		Date	
Full Name of # 8 joint Inven	tor:		Citizenship:
Residence:			
Post Office Address:	<del></del>		
Inventor's Signature			
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